


HCNP Systems

- ▶ Secure Log In
 - ▶ User Authorization Form
 - ▶ Available at: <https://hcnp.hawaii.gov/overview/nslp/>
 - ▶ Click on 'Program Resources' → 'HCNP Systems'



SY 23-24 Renewal Application

- ▶ Email notification was sent on May 30, 2023
- ▶ Read the instructions carefully before completing the renewal application



HCNP Systems




Welcome to
CPweb

Sign In:

Enter User ID:

Enter Password:




Select Program

Program Selection


Program Code	Program Description
SNP	School Nutrition Programs

Sign Out



Notice Board


Click Continue to go to the Program Year selection screen or select a Menu option



School Nutrition Programs

E-mail: Rachel.Itano@k12.hi.us
E-mail: Kasey.Kawamoto@k12.hi.us


Continue



Select the Program Year

Program Year Selection

Program Year	Program Begin Date	Program End Date
2014	July 2013	June 2014
2015	July 2014	June 2015
2016	July 2015	June 2016
2017	July 2016	June 2017
2018	July 2017	June 2018
2019	July 2018	June 2019
2020	July 2019	June 2020
2021	July 2020	June 2021
2022	July 2021	June 2022
2023	July 2022	June 2023
2024	July 2023	June 2024



Renewal Application


► Must complete all three parts:


Sponsor Application

Site Application(s)

Off-line Forms

► Application must be in **Pending Approval** status





Check that you are in Program Year 2024

Program Year: 2024

Sponsor: 1234-5-ABCDE School

Sponsor Summary

ABCDE School (1234-5)

Checklist

Applications

Forms


Claims

Payments

Training

Users

Item	Required	On-Line Forms Description	Count	Date	Status
1.	<input checked="" type="checkbox"/>	Sponsor Application			Required to begin the enrollment process.
2.	<input checked="" type="checkbox"/>	Site Application(s)	0 of 2		



Select the 'Applications' tab

Program Year: 2024

Sponsor: 1234-5-ABCDE School

Sponsor Summary

ABCDE School (1234-5)

Checklist

Applications

Forms

Claims

Payments

Training

Users

Item	Required	On-Line Forms Description	Count	Date	Status
1.	<input checked="" type="checkbox"/>	Sponsor Application			Required to begin the enrollment process.
2.	<input checked="" type="checkbox"/>	Site Application(s)	0 of 2		

Add Sponsor Application

Sponsor Summary ABCDE School (1234-5)

Checklist Applications Forms Claims Payments Training Users

Number	Name	Revision	Status	Date Approved	Action
Sponsor Application					
Site Application(s)					
123	ABCDE Elementary School				+
456	ABCDE Middle School				

Sponsor Application

- ▶ Some information from the preceding Program Year will automatically transfer over
 - ▶ Address and Contact Information
- ▶ Information not carried over
 - ▶ Vendor/FSMC and Contact Information
 - ▶ Wellness Policy
 - ▶ Verification Method
 - ▶ Meal Price Information
 - ▶ Professional Standards
 - ▶ Single Audit Compliance

Add Lines

Sample Sponsor Application

Vendor / Food Service Management Company and Contact Information

If Sponsor contracts with a Vendor or Food Service Management Company (FSMC) for meals served at ANY of the Sponsor's sites, please complete information for each Vendor/FSMC the Sponsor contracts with.

Vendor / Food Service Management Company - 1

Vendor Type: Food Service Management Company

Vendor Name: Food Service Management Company

Address: School/School District Vendor

City St Zip: 98 HI 98

Contract Begin Date: End Date: \$ Amount: 0.00

Is this a new contract? ☐ Yes ☐ No

If No will you be renewing the contract with this vendor/food service management company this Program Year? ☐ Yes ☐ No

Indicate Renewal Year:

Add Lines

Hawaii Child Nutrition Programs

Sample Sponsor Application

Verification Method

27. The Sponsor is requesting the following Verification selection method:

☐ Standard
☐ Alternate 1
☐ Alternate 2
☐ Not Required (RCCL, CEP District-wide, or Provision 2 or Provision 3 District-wide and not in a Base Year)

► USDA Eligibility Manual for School Meals, July 2017: https://fns-prod.azureedge.us/sites/default/files/cn/SP36_CACFP15_SFSP11-2017a1.pdf

Hawaii Child Nutrition Programs

Sample Sponsor Application

29. Do students pay for meals at any of the Sponsor's sites? ☒ Yes ☐ No

If Yes, enter the Meal Pricing information below:

	Breakfast		Lunch		After School Snack		Special Milk
	Paid	Redc	Paid	Redc	Paid	Redc	Paid
30. Preschool	0.00	0.00	0.00	0.00	0.00	0.00	0.00
31. Elementary	3.00	0.30	4.50	0.40	0.00	0.00	0.00
32. Middle/Jr.High/Intermediate	3.00	0.30	4.50	0.40	0.00	0.00	0.00
33. High School	0.00	0.00	0.00	0.00	0.00	0.00	0.00
34. Adult	3.75		5.50		0.00		

If the Sponsor operates the Special Milk Program, enter the average cost of 1/2 pint of milk: 0.00

Hawaii Child Nutrition Programs

Sponsor Application

- Verify existing information and make any changes
- Add information that is not carried over
- Certify the information that is not carried over
- Certify the information (field 42) and submit the Sponsor Application
- If any errors are identified, correct all errors and resubmit

Add Site Application

Sponsor Summary

ABCDE School (1234-5)

Checklist	Applications	Forms	Claims	Payments	Training	Users
Number	Name	Revision	Status	Date Approved	Action	
Sponsor Application		0	Pending Submission			
Site Application(s)						
123	ABCDE Elementary School				+	
456	ABCDE Middle School				+	

Site Application

- ▶ Most information from the previous year's approved Site Application will carry over
 - ▶ Contact Information
 - ▶ Program Participation Information (NSLP, SBP, FFVP)
 - ▶ Accountability Information
- ▶ Information not carried over:
 - ▶ Program Participation (ASP, SSO)
 - ▶ Food Safety Inspection Information

Sample Site Application

General Information

15. Site Type:

16. Campus Type:

17. Classification of Site:

18. ☐ Yes ☒ No Is this Site a Year Round School?

19. If Yes, what is the number of days in the Vacation Period?

20. ☒ Yes ☐ No Are meals served in locations other than the regular dining areas (such as classrooms, kiosks, other buildings, gyms, etc.)?

21. If Yes, how many other locations?

22. ☐ Yes ☒ No Does this site regularly serve meals to students off campus?

23. If Yes, how many off campus locations?



Sample Site Application

► **Residential Child Care Institutions (RCCIs) ONLY:**

► **Answer #24-25**


24. If this is a Licensed Site, complete the following:

License Effective Date:

License Expiration Date:

25. License Number:

➔ (Submit a copy of current License to HCNFP)



Sample Site Application

► **Do NOT complete the CEP section**

Community Eligibility Provision

Site data in this section should be entered specific to this individual site. Total Enrollment is the total number of students with access to this site's NSLP and SBP. Site Identified Students is the number of identified students only for this site.

CEP data is required for CEP participation. The CEP ISP should be entered according to how the site is participating in CEP: individual site ISP, aggregate group ISP for a group of schools, or aggregate SPA-wide ISP. When the site is participating as part of a group of schools or as part of the SPA-wide group, a group name must be entered exactly the same for each site participating in that group.


Year 1
(2024)

33. Total Site Enrollment:

34. Site - Identified Students:

35. Site ISP:

36. Site Free Claiming %:



Sample Site Application

National School Lunch Program

41. Participation: Regular Claiming

42. Months Meals Served:

All	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

43. Do students pay for Lunches at this Site?

☒ Yes ☐ No

44. Select Grades - Offer vs Serve (OVS) is implemented (Offer vs Serve is required for Grades 6, 10, 11, 12):

Ungraded			Head Start/Early Enrolled			Preschool			Kindergarten		
1	2	3	4	5	6	7	8	9	10	11	12
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

45. Lunches Served:

Mon	Tue	Wed	Thu	Fri	Sat	Sun
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

School Breakfast Program

46. Participation: Regular Claiming **Eligible for Severe Need Breakfast**

47. Months Meals Served:

All	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

48. Do students pay for Breakfast at this Site?

☒ Yes ☐ No

49. Select Grades - Offer vs Serve is implemented:

Ungraded			Head Start/Early Enrolled			Preschool			Kindergarten		
1	2	3	4	5	6	7	8	9	10	11	12
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

50. Breakfast Served:

Mon	Tue	Wed	Thu	Fri	Sat	Sun
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

8

Hawaii Child Nutrition Programs

After School Snack Program

55. Participation: Site Eligibility: Greater than or equal to 50%

56. Months Meals Served:

All	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

57. Snack Served:

Mon	Tue	Wed	Thu	Fri	Sat	Sun
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

58. Time Snack Program Begins:

59. Contact Name: Phone:

60. Snack Eligibility:

☐ Not Area Eligible - Site F/R eligibility less than 50%

☐ Area Eligible - Site F/R eligibility 50% or greater

☐ Area Eligible - Attendance Area F/R eligibility 50% or greater

61. If Area Eligible by Attendance Area enter the name of the closest school with 50% or greater F/R eligibility:

School / Site Name:

62. Site Number:

63. Program Name:

64. Activities:

Hawaii Child Nutrition Programs

Fresh Fruit and Vegetable Program

65. Participation: Not Eligible for Fresh Fruit and Vegetable Program

66. Months Meals Served:

All	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

67. Contact Name: Address 1:

68. Title: Address 2:

69. Email: City:

70. Phone: Ext: State: Zip Code:

71. Fax:

72. Describe the FFVP implementation plan for this site. Include a description of how the FFVP will be integrated with other efforts to promote good health and nutrition, reduce obesity and encourage physical activity. Examples: Integrated nutrition education in the daily curriculum, using free USDA Team Nutrition materials, incorporating the FFVP into the school's Wellness Policy.

73. Describe how free fresh fruits and vegetables will be made available to all enrolled students at this site during the school day, outside of the NSLP and SBP meal periods. Examples: Cans or snacks in the hallway, fruits and vegetables in classrooms, vending machines dispensing free fruits and vegetables.

74. Describe partnership activities already implemented or planned as part of the FFVP implementation at this site. For each partnership listed include if the partner is contributing, or will contribute non-Federal resources to the FFVP. Examples of partnerships: Local growers, health departments, extension services, local grocers, or fruit and vegetable industry representatives.

By submission of this application the School District administration, the school administration, and School Food Service certify that the Fresh Fruit and Vegetable Program will be implemented and sustained according to the policies and procedures required by the USDA. Further, the school administration and the School Food Service agree to participate in any USDA approved evaluations and to provide information requested by the specified deadlines.

Hawaii Child Nutrition Programs

Seamless Summer Option (SSO)

Program Year: 2024 Sponsor: 1234-S-ABCDE School

75. Participation: Not Participating

76. Months Meals Served:

All	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The SSO provides meals to the neighborhood community by:

77. ☐ School Communication ☐ School Registration Form ☐ Press release

78. Date of Public Media Notice:

79. Program Start Date: Program End Date:

80. ☐ Yes ☐ No

Does this Site serve meals only to children enrolled in summer school programs? (If this site intends to serve meals only to children enrolled in a summer school program, the site is not eligible to participate in the Seamless Summer Option. This site may receive reimbursement under the NSLP and/or SBP for meals served only to children enrolled in a summer school program.)

This is July 2023

This is June 2024.
For SSO in June 2023:
revise the Site Application in Program Year 2023

[illegible]

Hawaii Child Nutrition Programs

CORRECT

92. **1st Annual Inspection:**

- ☒ Received a health inspection during school year 2022 - 2023.
- 93. Enter date inspection occurred:
- ☐ A health inspection was requested during school year 2022 - 2023, but was not completed. (enter if request is available)
- ☐ No health inspection was requested during school year 2022 - 2023.

94. **2nd Annual Inspection:**

- ☐ Received a health inspection during school year 2022 - 2023.
- 95. Enter date inspection occurred:
- ☒ A health inspection was requested during school year 2022 - 2023, but was not completed. (enter if request is available)
- ☐ No health inspection was requested during school year 2022 - 2023.

96. ☐ This school has received three or more Health Inspections.

WRONG

92. **1st Annual Inspection:**

- ☐ Received a health inspection during school year 2022 - 2023.
- 93. Enter date inspection occurred:
- ☒ A health inspection was requested during school year 2022 - 2023, but was not completed. (enter if request is available)
- ☐ No health inspection was requested during school year 2022 - 2023.

94. **2nd Annual Inspection:**

- ☐ Received a health inspection during school year 2022 - 2023.
- 95. Enter date inspection occurred:
- ☒ A health inspection was requested during school year 2022 - 2023, but was not completed. (enter if request is available)
- ☐ No health inspection was requested during school year 2022 - 2023.

96. ☐ This school has received three or more Health Inspections.

Hawaii Child Nutrition Programs

Accountability Procedures

97. Collection and Meal Counting Method:

- ☐ Name Checklist/Roster
- ☐ Tickets
- ☐ POS Computer System
- ☐ Other

If "POS Computer System" is selected for Meal Counting Method please enter the following:

98. Brand Name of the POS Computer System:

99. POS Computer System data input method:

PIN	Barcode Reader	Verbal Identifier
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

100. If "Other" is selected for Collection and Meal Counting Method enter description of Procedure used:

Hawaii Child Nutrition Programs

101. Student Payments made by:

- ☐ Cash in Serving Line
- ☐ Prepaid Daily
- ☐ Prepaid Weekly
- ☐ Prepaid Monthly
- ☐ Monthly Billing
- ☐ Non-Pricing


102. Point of Service (Meals are counted):

☒ End of Line ☐ Exception

103. ☐ **Standard Exception Procedures** - Check here if the following procedures are followed:


Procedures: Due to the physical facilities, a more accurate meal count occurs when the official count is made at the beginning of the serving line with an adult checking each tray for a reimbursable meal at the end of the serving line. Sufficient supervision and barriers will be positioned to prevent any student from leaving or entering the serving line between these two points. If a non-reimbursable meal is identified, appropriate corrective action will be taken regarding the child's selections or the meal will not be counted as reimbursable in any category. A kitchen and office meal count will continue to be reconciled daily for accuracy.


104. If **Exception** is selected but the above Standard Exception Procedures are not used, describe the SFA's procedure:





Site Application


- ▶ Verify existing information and make any changes
- ▶ Add information that is not carried over
- ▶ Certify (field 105) and submit application
- ▶ If any errors are identified, correct errors and resubmit







Off-line Forms

- ▶ Off-line forms must be submitted to HCNP as part of the renewal application
 - ▶ Upload off-line forms by clicking the upload button 
- ▶ Forms marked with the red check mark  are REQUIRED






Off-line Forms



- ▶ **Single Agreement**
 - ▶ Must be signed and submitted by ALL SFAs
- ▶ **Fresh Fruit and Vegetable Program Application**
 - ▶ Must upload if participating in FFVP
- ▶ **Off-Campus Meal Service and Counting Locations**
 - ▶ Must upload if 'Yes' to question #22 on site application



Hawaii Child Nutrition Programs

Sponsor Summary ABCDE School (1234-5)

Checklist Applications Forms Claims Payments Training Status Users

Item	Required	On-Line Forms Description	Count	Date	Status
1.	<input checked="" type="checkbox"/>	Sponsor Application	2 of 2		Pending Submission
2.	<input checked="" type="checkbox"/>	Site Application(s)	2 of 2		Pending Submission

Item	Required	Off-Line Forms Description	Downloads	Date Sent	Date Received	Date Complete	Action
1.	<input checked="" type="checkbox"/>	Single Agreement					
2.	<input checked="" type="checkbox"/>	Free and Reduced Price Meal Policy Statement					
3.	<input checked="" type="checkbox"/>	Authorizing Officials for Free and Reduced-Price Applications					
4.	<input checked="" type="checkbox"/>	Attestation of Compliance with Meal Pattern Requirements for the Annual Agreement Renewal					
5.	<input checked="" type="checkbox"/>	FIMAC Contract					
6.	<input checked="" type="checkbox"/>	Vended Meals Contract					
7.	<input checked="" type="checkbox"/>	Intergovernmental Agreement for Vended Meals					
8.	<input checked="" type="checkbox"/>	On-Campus Meal Service and Counting Locations					
9.	<input checked="" type="checkbox"/>	W-9					
10.	<input checked="" type="checkbox"/>	School(s) Documentation					
11.	<input checked="" type="checkbox"/>	Hawaii Tax ID Numbers					
12.	<input checked="" type="checkbox"/>	Licensing					
13.	<input checked="" type="checkbox"/>	Deliverment & Suspension					
14.	<input checked="" type="checkbox"/>	Fresh Fruit and Vegetable Program Application					
15.	<input checked="" type="checkbox"/>	Off-Campus Meal Service and Counting Locations					

☒ Enter Dates for Required Off-Line Forms

Hawaii Child Nutrition Programs

Sponsor Summary ABCDE School (1234-5)

Checklist Applications Forms Claims Payments Training Status Users

Item	Required	On-Line Forms Description	Count	Date	Status
1.	<input checked="" type="checkbox"/>	Sponsor Application	2 of 2		Pending Submission
2.	<input checked="" type="checkbox"/>	Site Application(s)	2 of 2		Pending Submission

Item	Required	Off-Line Forms Description	Downloads	Date Sent	Date Received	Date Complete	Action
1.	<input checked="" type="checkbox"/>	Single Agreement					
2.	<input checked="" type="checkbox"/>	Free and Reduced Price Meal Policy Statement					
3.	<input checked="" type="checkbox"/>	Authorizing Officials for Free and Reduced-Price Applications					
4.	<input checked="" type="checkbox"/>	Attestation of Compliance with Meal Pattern Requirements for the Annual Agreement Renewal					
5.	<input checked="" type="checkbox"/>	FIMAC Contract					
6.	<input checked="" type="checkbox"/>	Vended Meals Contract					
7.	<input checked="" type="checkbox"/>	Intergovernmental Agreement for Vended Meals					
8.	<input checked="" type="checkbox"/>	On-Campus Meal Service and Counting Locations					
9.	<input checked="" type="checkbox"/>	W-9					
10.	<input checked="" type="checkbox"/>	School(s) Documentation					
11.	<input checked="" type="checkbox"/>	Hawaii Tax ID Numbers					
12.	<input checked="" type="checkbox"/>	Licensing					
13.	<input checked="" type="checkbox"/>	Deliverment & Suspension					
14.	<input checked="" type="checkbox"/>	Fresh Fruit and Vegetable Program Application					
15.	<input checked="" type="checkbox"/>	Off-Campus Meal Service and Counting Locations					

☒ Enter Dates for Required Off-Line Forms


Hawaii Child Nutrition Programs

Item	Required	Off-Line Forms Description	Downloads	Date Sent	Date Received	Date Complete	Action
1.	<input checked="" type="checkbox"/>	Single Agreement					
2.	<input checked="" type="checkbox"/>	Free and Reduced Price Meal Policy Statement		06/07/2023	06/07/2023		
3.	<input checked="" type="checkbox"/>	Authorizing Officials for Free and Reduced-Price Applications					
4.	<input checked="" type="checkbox"/>	Attestation of Compliance with Meal Pattern Requirements for the Annual Agreement Renewal					

Hawaii Child Nutrition Program

Final Steps

Important

- ▶ At the bottom of the Checklist tab, you should see "Submit to the State for Approval"
- ▶ Click  to submit your renewal application to the State for approval
- ▶ Check that your application is in "Pending Approval" status

Hawaii Child Nutrition Program

Sponsor Summary **ABCDE School (1234-5)**

Checklist Applications Forms Claims Payments Training Users

Item	Required	On-Line Forms Description	Count/Date	Status
1.	<input checked="" type="checkbox"/>	Sponsor Application	2 of 2	Pending Submission
2.	<input checked="" type="checkbox"/>	Site Application(s)		Pending Submission

Item	Required	On-Line Forms Description	Downloads	Date Sent	Date Received	Date Complete	Action
1.	<input checked="" type="checkbox"/>	Single Agreement		06/07/2023	06/07/2023		
2.	<input checked="" type="checkbox"/>	Free and Reduced Price Meal Policy Statement		06/07/2023	06/07/2023		
3.	<input checked="" type="checkbox"/>	Authorizing Officials for Free and Reduced Price Applications		06/07/2023	06/07/2023		
4.	<input checked="" type="checkbox"/>	Attestation of Compliance with Meal Pattern Requirements for the Annual Agreement Renewal		06/07/2023	06/07/2023		
5.	<input checked="" type="checkbox"/>	FSM Contract					
6.	<input checked="" type="checkbox"/>	Vendor Meal Contract		06/07/2023	06/07/2023		
7.	<input checked="" type="checkbox"/>	Intergovernmental Agreement for Vended Meals					
8.	<input checked="" type="checkbox"/>	On-Campus Meal Service and Counting Locations		06/07/2023	06/07/2023		
9.	<input checked="" type="checkbox"/>	WIS					
10.	<input checked="" type="checkbox"/>	Schools Documentation					
11.	<input checked="" type="checkbox"/>	Annual Tax ID Numbers					
12.	<input checked="" type="checkbox"/>	Lobbying					
13.	<input checked="" type="checkbox"/>	Debarment & Suspension					
14.	<input checked="" type="checkbox"/>	Fresh Fruit and Vegetable Program Application		06/07/2023	06/07/2023		
15.	<input checked="" type="checkbox"/>	Off-Campus Meal Service and Counting Locations					

☒ Enter Dates for Required Off-Line Forms

Submit all forms to the State for Approval

Remember to do this last step

Hawaii Child Nutrition Program

Pending Approval Status

Sponsor Summary **ABCDE School (1234-5)**

Checklist Applications Forms Claims Payments Training Users

Item	Required	On-Line Forms Description	Count/Date	Status
1.	<input checked="" type="checkbox"/>	Sponsor Application	2 of 2	Pending Approval
2.	<input checked="" type="checkbox"/>	Site Application(s)		Pending Approval
3.	<input checked="" type="checkbox"/>	Forms Submitted to State for Approval	05/11/2021	Pending Approval

Item	Required	On-Line Forms Description	Downloads	Date Sent	Date Received	Date Complete	Action
1.	<input checked="" type="checkbox"/>	Single Agreement					
2.	<input checked="" type="checkbox"/>	Free and Reduced Price Meal Policy Statement		06/07/2023	06/07/2023		
3.	<input checked="" type="checkbox"/>	Authorizing Officials for Free and Reduced Price Applications		06/07/2023	06/07/2023		
4.	<input checked="" type="checkbox"/>	Attestation of Compliance with Meal Pattern Requirements for the Annual Agreement Renewal		06/07/2023	06/07/2023		

Make sure the status is PENDING APPROVAL



Approval Process

- ▶ NSLP Specialist will review the Sponsor Application, Site Application(s), and Off-line forms
 - ▶ Specialist will either approve the renewal or send forms back to the SFA for correction
 - ▶ SFA must make all corrections and resubmit the application
- ▶ The application is approved when the status is 'Approved'






Deadline

- ▶ **SY 23-24 Renewal Application:**
 - ▶ **FRIDAY, JUNE 30, 2023**



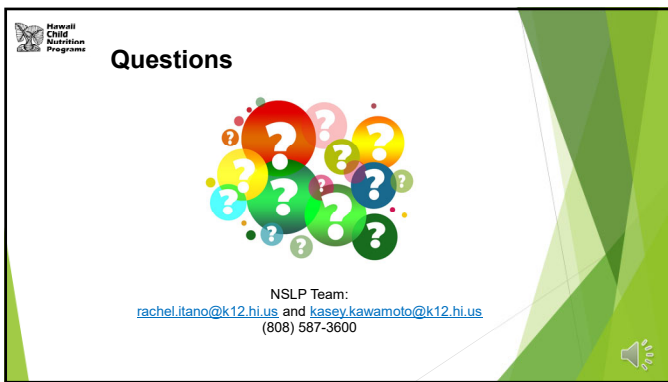


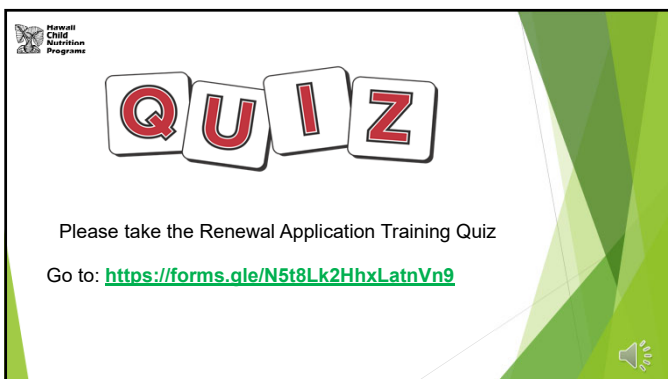
Reminders

- ▶ Three parts to the renewal application: Sponsor Application, Site Application(s), and Offline forms
- ▶ Make sure all information is accurate and up to date
- ▶ Complete and upload all offline forms with the red check mark 
- ▶ Complete and submit the Single Agreement – **applies to ALL SFAs**
- ▶ If applicable, upload the FFVP application(s) and completed Off-Campus Meal Service and Counting Locations form
- ▶ Make sure the status is in **Pending Approval**
- ▶ Deadline: Friday, June 30, 2023











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Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/ad-3027.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

mail:
U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410; or

fax:
(833) 256-1665 or (202) 690-7442; or

email:
program.intake@usda.gov

This institution is an equal opportunity provider.
